CANDIDATE ADVERTISEMENT AGREEMENT FORM

See Order for proposed schedule and charges.	See Invoice for actual schedule and charges.							
ן, Ted Gans	, hereby request station time as follows:							
IDENTIFY CANDIDATE TYPE	RAL CANDIDATE							
STAT	E OR LOCAL CANDIDATE							
ALL QUESTIONS/BLOCK	S MUST BE COMPLETED							
Candidate name:								
Ted Gans								
Authorized committee:								
self	CONTROL OF THE CONTRO							
Agency requesting time (and contact information):								
✓ N/A	,							
Candidate's political party;								
Office sought (no acronyms or abbreviations):								
Red Willow County Commisioner of District 1	And the second s							
Date of election: 5/10/22	General Primary							
Treasurer of candidate's authorized committee:	THE STATE OF THE STATE OF THE AND THE STATE OF THE STATE							
self								
The undersigned represents that:								
(1) the payment for the broadcast time requested has been furnished by (check one box below):								
the candidate listed above who is a legally qualified candidate, or								
the authorized committee of the legally qualified candidate listed above;								
(2) this station is authorized to announce the time as paid for by such person or entity; and								
(3) this station has disclosed its political advertising policies, including applicable classes and rates, discount, promotion and other sales practices (not applicable to federal candidates).								
THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISC IN THE PLACEMENT OF ADVERTISING.	RIMINATION ON THE BASIS OF RACE OR ETHNICITY							
Candidate/Committee/Agency	Station Representative							
Signature:	Signatur							
Del In	Eyen during							
Name: Ted Gans	Name: Bryan Loker							
Date of Request to Purchase Ad Time:	Date of Station Agreement to Sell Time:							

Federal Candidate Certification: The undersigned hereby certifies that the broadcast matter to be aired pursuant to this disclosure either (1) does not refer to an opposing candidate or, if it does, (2) contains a clearly identifiable photograph or similar image of the candidate for a duration of at least four seconds and a simultaneously displayed printed statement identifying the candidate, that the candidate approved the broadcast and that the candidate and/or the candidate's authorized committee paid for the broadcast or if radio programming, contains a personal audio statement by the candidate that identifies the candidate, the office being sought and that the candidate has approved the broadcast.										
the onice being sought and that the care	uldate has approved the producast.									
Candidate/Authorized Committee/	Agency									
Signature:	UNIC CHARGESTON OF A TOTAL OF THE SEA SHARM FEEL OF THE SHARM SHARW SHAR									
Name:	NATIONAL THROWAND WATERWAY HEROTOPHIQUES CHEVROAND HEROTOPHICAL STRUMENTS SOME THROWAND SOME THROUGH A PRINCIPAL STRUMENTS AND THE STRUMENTS AND THROUGH A PRINCIPAL STRUMENTS A									
Date:										
TO BE COMPLETED BY STATION ONLY										
Ad submitted to Station? Yes No Date ad received: 3/4/22										
Note: Must have separate PB-19 Forms for each version of the ad (i.e., for every ad with differing copy).										
Federal candidate certification signed (ak	pove): Yes No	N/A								
Disposition:	унь куньковы на 25 са Фикра II в сегото на техноска укольто под свой общений в быть и дом на за выновы общено на под	эминикальный найменный <mark>т</mark> енный нестоянный найменный найменный найменный найменный найменный найменный найменный н								
Accepted										
	not yet received to determine sponsor ID))*								
Rejected – provide reason:		•								
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*Upload partially accepted form, then promptly upload updated final form when complete.										
Date and nature of follow-ups, if any (e.g.	., insufficient sponsor ID tag):	SUBJECTION OF THE PROPERTY OF								
Contract #:	Station Call Letters:	Date Received/Requested:								
Est. #:	Station Location: MCLDINC LT	Run Start and End Dates:								
use this space to document schedule of t purchased or attach separately. If station	affic system print-out) or other documents ime purchased, when spots actually aired, will not upload the actual times spots aired information immediately should be placed	, the rates charged and the classes of time d until an invoice is generated, the name								

Date: 3/04/22

Sales Order

Sta	tion:	KICX-FM										Buyer:							
Cor	ntract Nar	ne: 22re	dwil	lowcoco	mmisTG	ANS												(None)	
											Agency	/ Cc	ommiss	sion 9	%: 0				
Sta	Start Date: 3/08/22 End Date:																		
Revenue Type: Local Political 1							_. Ty	/pe:	Casi										
Advertiser: Theodore Gans											Makego	boc	Policy	: Wi	thin C	ontract [Dates		
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City	•	McCod	ok .		State: NE	Zip:			6900	1									
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C Local Sales Manager